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	Attorney Docket Numb	per EX03-079C-US
DECLARATION FOR UTILITY OR DESIGN	First Named Inventor	Plowman, et al
PATENT APPLICATION		COMPLETE IF KNOWN
(37 CFR 1.63)	Application Number	10/532,406
□ Declaration □ Declaration Submitted OR Submitted after Initial	Filing Date	April 22, 2005
With Initial Filing (surcharge Filing (37 CFR 1.16 (e))	Art Unit	
required)	Examiner Name	Lamont M. Hunter
	*	

I hereby declare that:										
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.										
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
MAPK7 AS MODI	FIER OF BRANCHING	G MORPHOGENES	IS AND MET	HODS OF US	E					
the specification of which	(Title of th	e Invention)			-					
is attached hereto				` .						
OR	•		•							
was filed on (MM/DD	^{//YYY)} 10/22/2003	as United States Ap	plication Number o	r PCT International						
Application Number	PCT/US03/33551 and	was amended on (MM/DD/Y	YYY)	(if a	applicable).					
I hereby state that I have revamended specifically referre	riewed and understand the cod to above.	ontents of the above identif	ied specification, i	ncluding the claim	s, as					
continuation-in-part applicati	sclose information which is money in the continuity on the continuity on all filling date of the continuity on the continuity of the conti	ich became available betwe			ation and					
breeder's rights certificate(s), States of America, listed below	penefits under 35 U.S.C. 119(a or 365(a) of any PCT internati w and have also identified belo or any PCT international appl	ional application which desig ow, by checking the box, any	nated at least one foreign application	country other than for patent, invento	the United					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy						
Namber(5)	- Country	(11111200711117)	Not Claimed	YES	NO					
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+	·	**	7							
Additional foreign applicat	ion numbers are listed on a sur	oplemental priority data shee	t PTO/SB/02B attac	ched hereto:						

[Page 1 of 2]

[Page 1 of 2]
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DECLARATION — Utility or Design Patent Application

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Country		1	Telepho	one		ı	Fax	
US	-	4 1	50-837			16	550-837-8234	·
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR:			A petiti	ion has	been fi	led fo	r this unsigned	inventor
Given Name (first and middle [if any]) GREGORY D.	· .		4	ily Name WMAN	or Su	rnam		Y V
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Additional inventors or a legal representative are being n	amed on	the 5 supr	olementa	al sheet(s)	PTO/S	B/02A d	or 02LR attached	hereto.

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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 1 of 5

Name of Additional Inventor, if any			☐ A petition has been filed for this unsigned inventor				
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City	State		Zip	Co	untry DE		

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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 2 of 5

Name of Additional Inv	Name of Additional Inventor, if any				A petition has been filed for this unsigned inventor				
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ADDITIONAL INVENTOR(S) Supplemental Sheet

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Name of Additional	Inventor, if an	у		A petition has been filed for this unsigned inventor				
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Mailing Address	,							
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Inventor's Signature						Date		
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JOERG HEINRICH			0	DENTHAL				
Inventor's Signature			•			Date		
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Mailing Address	OTTO-ERBE-WEG	18						
	72070 TUEBINGEN							
City		State		Zip	Ċo	untry DE		

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Page 4 of 5

Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor			
Given N	Given Name (first and middle [if any])			Family Name or Surname			
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Given N	lame (first and middle	[if any])			Far	mily Name or Surname	
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Inventor's Signature		•				Date	
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City	St	ate	Zij	0		Country DE	
Name of Additiona	l Inventor, if any	1		☐ A petition has been filed for this unsigned inventor			
Given N	lame (first and middle	[if any])			Far	mily Name or Surname	
YISHENG		•		JIN			
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Mailing Address	192 36 TH AVENUE, A	APT. B					
Mailing Address		-			•		
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DECLARATION

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Name of Additional Inventor, if any			☐ A petition has been filed for this unsigned inventor				
Given Name (first and midd	le [if any])		Family Name or Surname				
JOANNE I.		ADA	AMKEWICZ				
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SAN Residence: City FRANCISCO	CA State	Coun	US try		US Citizenship		
Mailing Address 1249 RHODE ISLA	ND STREET						
Mailing Address					•		
City SAN FRANCISCO	CA State	ZIP	94107	Cou	US		
Name of Additional Inventor, if a	ıy ·	□ A	petition has been filed	for th	nis unsigned inventor		
Given Name (first and middle [if any])			Family Name or Surname				
Inventor's Signature					Date		
Residence: City	State	Count	try		Citizenship		
Mailing Address							
Mailing Address							
City	State	Zip		Cou	ntry		
Name of Additional Inventor, if ar	ıy		A petition has been filed for this unsigned inventor				
Given Name (first and middl	e [if any])		Fai	mily N	Name or Surname		
Inventor's Signature					Date		
Residence: City	State	Count	try		Citizenship		
Mailing Address							
Mailing Address					,		
City	State	2	Zip	Co	untry		

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PATENT APPLICATION		COMPLETE IF KNOWN				
(37 CFR 1.63)	Application Number	10/532,406				
□ Declaration □ Declaration Submitted OR Submitted after Initial	Filing Date	April 22, 2005				
With Initial Filing (surcharge Filing (37 CFR 1.16 (e))	Art Unit	***				
required)	Examiner Name Lamont M. Hunter					
I hereby declare that:						
Each inventor's residence, mailing address, and cit	izenship are as stated be	low next to their name.				
I helieve the inventor(s) named helow to be the original an	d first inventor(s) of the subje	ect matter which is claimed and for which a nater				

Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:											
MAPK7 AS MODII	FIER OF BRANCHIN	G MORPHOGENES	IS AND MET	HODS OF U	JSE						
the specification of which	(Title of th	ne Invention)									
is attached hereto	·. ·										
was filed on (MM/DD/	10/22/2003	as United States Apwas amended on (MM/DD/Y			ial (if applicable).						
I hereby state that I have rev amended specifically referre		ontents of the above identif	ied specification, i	including the cla	ims, as						
I acknowledge the duty to dis continuation-in-part applicati the national or PCT internation	ons, material information wh	ich became available betwe	efined in 37 CFR een the filing date	1.56, including to of the prior app	for lication and						
I hereby claim foreign priority by breeder's rights certificate(s), States of America, listed below breeder's rights certificate(s), claimed.	or 365(a) of any PCT internat v and have also identified belo	ional application which designments ow, by checking the box, any	nated at least one foreign application	country other the for patent, inve	an the United ntor's or plant						
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop YES	y Attached? NO						
(2)											
Additional foreign application	on numbers are listed on a su	pplemental priority data shee	t PTO/SB/02B attac	ched hereto:							

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	dence to: Customer Number			23500 OR			Correspondence address below
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us			650-837	-8223		650-	-837-8234
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:			A petit	ion has	been file	ed for th	is unsigned inventor
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GREGORY D.			PLO	WMAN			*
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page <u>1</u> of <u>5</u>

Name of Additional Inventor, if any			☐ A petition has been filed for this unsigned inventor					
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HINRICH ALEXANDER			HABECK					
Inventor's Signature	4				Date			
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City	tate	Zip		Cour	ntry DE -			
Name of Additional Inventor, if an	у	A petition has been filed for this unsigned inventor						
Given Name (first and middle	e [if any])		Fai	nily N	ame or Surname			
THOMAS I.		K	OBLIZEK					
Inventor's Signature					Date			
Residence: City	State	Cou	intry DE	C	Citizenship DE			
Mailing Address GECHTSTR. 31				,				
Mailing Address 72074 TUEBINGEN								
City	State		Zip	Cou	intry DE			

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 2 of 5

Name of Addition	nal Inventor, if any	1		A petition has been	filed	for this unsigned inventor
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Name of Addition	al Inventor, if any	/	L	A petition has been file	ed for t	his unsigned inventor
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Name of Addition	al Inventor, if any	' :		A petition has been	filed f	or this unsigned inventor
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GORDON MARK	· .		8	тотт	•	
Inventor's Signature				٠.		Date
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Mailing Address	11 UPPER TERRACI			•		
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Page 3 of 5

Name of Additional Inve	entor, if any	<i>y</i>		A petition has been	filed	for this unsigned inventor	
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Name of Additional Inve	entor, if any	1		☐ A petition has been	filed f	or this unsigned inventor	
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Page 4 of 5

Name of Additional Inventor, if a	ny		A petition has been	filed	for this unsigned inventor
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page <u>5</u> of <u>5</u>

Name of Additional Inventor,	☐ A petition has be	A petition has been filed for this unsigned inventor			
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Residence: City	State	Country		Citizenship	
Mailing Address				•	
Mailing Address					
City	State	Zip	Co	untry	
Name of Additional Inventor,	f any	A petition has be	een filed f	or this unsigned inventor	
Given Name (first and	niddle [if any])		Family	Name or Surname	
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Inventor's Signature				Date	
Residence: City	State	Country		Citizenship	
Mailing Address					
Mailing Address	. ———	7			
City	State	Zip	Co	ountry	

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EX03-079C-US

Plowman, et al

COMPLETE IF KNOWN

10/532,406

April 22, 2005

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DECLARATION FOR UTILITY OR

DESIGN

PATENT APPLICATION (37 CFR 1.63)

OR

Submitted after Initial

□ Declaration

Submitted

Attorney Docket Number

First Named Inventor

Application Number

Filing Date

With Initial Filing	Filing (surcharge (37 CFR 1.16 (e))	Art Unit										
·g	required)	Examiner Name	Lamont M. Hu	ınter								
I hereby declare that:												
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.												
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:												
MAPK7 AS MODI	FIER OF BRANCHING	MORPHOGENES	IS AND METI	HODS OF USE								
	.•											
the specification of which	(Title of the	e Invention)										
is attached hereto		•			. `							
OR Was filed on (MM/DD.	/YYYY	as United States Ap	nlication Number o	r PCT International								
,	10/22/2003											
Application Number		was amended on (MM/DD/Y			oplicable).							
amended specifically referre	viewed and understand the co d to above.	ontents of the above identif	ied specification, i	ncluding the claims	, as							
continuation-in-part applicati	sclose information which is m ions, material information whic onal filing date of the continua	ch became available betwe	efined in 37 CFR een the filing date	1.56, including for of the prior applicat	ion and							
	penefits under 35 U.S.C. 119(a)											
States of America, listed below	or 365(a) of any PCT internation and have also identified below or any PCT international appliance.	w, by checking the box, any	foreign application	for patent, inventor	's or plant							
Prior Foreign Application	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy A	ttached?							
Number(s)	Country	(1011000071111)	Not Claimed	YES	NO							
	×			. 0								
Additional foreign applicat	ion numbers are listed on a suc	plemental priority data shee	t PTO/SB/02B attac	ched hereto:								

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[Page 1 of 2]

DECLARATION — Utility or Design Patent Application

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	<u>·</u>						
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	<u> </u>		Telepho	one	l.		ax
Country US	-	- 1	650-837			1 '	50-837-8234
	s le== : 1 :		_		atom		a on information and halist are
I hereby declare that all statements made herein of my own believed to be true; and further that these statements were punishable by fine or imprisonment, or both, under 18 U.S. application or any patent issued thereon.	made wit	th the kn	iowledae	that willf	ful false	statem	ients and the like so made are
NAME OF SOLE OR FIRST INVENTOR:							this unsigned inventor
Given Name (first and middle [if any]) GREGORY D.		,		ily Name WMAN	e or Su	rname	•
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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 1 of 5

Name of Additional Inventor, if an	ditional Inventor, if any			iled	for this unsigned inventor	
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Mailing Address 72074 TUEBINGEN			•			
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Name of Addition	Name of Additional Inventor, if any			or this unsigned inventor				
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Name of Addition	al Inventor, if an	y		A petition has been file	d for th	is unsigned inventor		
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GORDON MARK			s	тотт				
Inventor's Signature		-		, , , , , , , , , , , , , , , , , , ,		Date		
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Mailing Address	11 UPPER TERRAC	E .						
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PTO/SB/02A (08-03)

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Given Na	ame (first and middle	[if any])			Far	mily Name or Surname
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Name of Additional	Inventor, if any			A petition ha	s been filed	for this unsigned inventor
Given Na	ame (first and middle	[if any])			Far	mily Name or Surname
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Name of Additional	Inventor, if any	,		☐ A petition	has been fil	led for this unsigned inventor
Given Na	ame (first and middle	[if any])			Far	mily Name or Surname
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Page <u>5</u> of <u>5</u>

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Given Name (first and midd	le (if anvi)		Family	Name or Surname	
JOANNE I.		ADAMKEWICZ		reality of Garnanie	
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Mailing Address			•		
Mailing Address					
City	State	Zip	Cou	untry	
Name of Additional Inventor, if ar	ny	A petition has b	een filed fo	or this unsigned inventor	
Given Name (first and middl	e [if any])		Family I	Name or Surname	
Inventor's Signature				Date	
Residence: City	State	Country		Citizenship	
Mailing Address					
Mailing Address					
City	State	Zip	Со	ountry	

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EX03-079C-US Attorney Docket Number **DECLARATION FOR UTILITY OR** Plowman, et al First Named Inventor **DESIGN** COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) **Application Number** 10/532,406 □ Declaration □ Declaration Filing Date April 22, 2005 Submitted OR Submitted after Initial With Initial Filing (surcharge Art Unit (37 CFR 1.16 (e)) Filing required) **Examiner Name** Lamont M. Hunter

I hereby declare that:										
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.										
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
MAPK7 AS MODIFIER OF BRANCHING MORPHOGENESIS AND METHODS OF USE										
the specification of which	(Title of th	e Invention)								
is attached hereto										
OR ☑ was filed on (MM/DD/	YYYY	as United States Ap	olication Number of	r PCT International						
<u> </u>	10/22/2003									
	101/0005/55001	was amended on (MM/DD/Y)		,	applicable).					
I hereby state that I have rev amended specifically referre	riewed and understand the co d to above.	ontents of the above identifi	ied specification, i	ncluding the claim	s, as					
continuation-in-part applicati	sclose information which is mons, material information whith onal filing date of the continu	ich became available betwe	efined in 37 CFR een the filing date	1.56, including for of the prior applica	ation and					
breeder's rights certificate(s), States of America, listed below	penefits under 35 U.S.C. 119(a or 365(a) of any PCT internati w and have also identified belo or any PCT international appl	ional application which desig ow, by checking the box, any	nated at least one foreign application	country other than for patent, invento	r's or plant					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy						
Nulliber(s)	Country	(1111/00/1111)		YES	NO					
Additional foreign applicat	ion numbers are listed on a su	nolemental priority data shee	t PTO/SB/02B attac	ched hereto:						

[Page 1 of 2]

[Fage I OI 2]
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Numb	er [23500		OR	Correspondence address below
Name						
Laleh Shayesteh						
Address						
Exelixis, Inc.						
170 Harbor Way						. •
P.O. Box 511						•
City .	State				ZI	P .
South San Francisco	CA				94	083-0511
Country		Ĩ	Teleph	one		Fax
us			650-837	-8223		650-837-8234
I hereby declare that all statements made herein of my own believed to be true; and further that these statements were punishable by fine or imprisonment, or both, under 18 U.S.0 application or any patent issued thereon.	made w	ith the k	nowledge	that will	ful false stat	tements and the like so made are
NAME OF SOLE OR FIRST INVENTOR:			A petit	ion has	been filed	for this unsigned inventor
Given Name (first and middle [if any]) GREGORY D.			Family Name or Surname PLOWMAN			me .
Inventor's Signature					Date	
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Mailing Address 35 WINDING WAY	i					
City	State		. 4	Zip		Country
SAN CARLOS	CA			94070)	US
NAME OF SECOND INVENTOR:			A petit	ion has	been filed	for this unsigned inventor
Given Name (first and middle [if any]) FELIX D.			Fam KAR		e or Surna	me
Inventor's Signature		·. ·			Date	
Residence: City	State	,		Count	ry	Citizenship
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Mailing Address 732 LAUREL DRIVE						
City WALNUT CREEK	State			Zip 94596		Country US
	1					
Additional inventors or a legal representative are being n	amed on	the <u>5</u> su	pplement	al sheet(s) PTO/SB/02	A or 02LR attached hereto.

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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page <u>1</u> of <u>5</u>

Name of Addition	al Inventor, if an	у		☐ A petition has been filed for this unsigned inventor				
Given	Name (first and middl	e [if any])		Far	nily Name or Surname			
CANDACE			sv	VIMMER				
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Mailing Address	1064 CAROLINA S	TREET						
Mailing Address								
City SAN FRANCISCO		CA State	ZIP	94107	US			
Name of Addition	nal Inventor, if ar			A petition has been filed	for this unsigned inventor			
Given	Name (first and midd	e [if any])		Family Name or Surname				
HINRICH ALEXANDER		21	H	HABECK				
Inventor's Signature	lik h	U.		Date 7-2-2006				
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Mailing Address	GERTRUD-BAEUN	IER-STR. 74						
Mailing Address	72074 TUEBINGEN	l						
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Name of Addition	nal Inventor, if a	ıy		☐ A petition has been filed for this unsigned inventor				
Giver	n Name (first and midd	e [if any])		Fa	mily Name or Surname			
THOMAS I.			к	OBLIZEK				
Inventor's Signature					Date			
Residence: City		State	Cou	ıntry DE	Citizenship DE			
Mailing Address	GECHTSTR. 31							
Mailing Address	72074 TUEBINGE	٠ .						
City		State		Zip	Country			

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Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor				
Given	Name (first and middle	[if any])		Family Name or Surname				
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Inventor's Signature							Date	
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Mailing Address	3584 CT UTRECHT							
City	s	State	ZIF	Р.		Cou	NL Intry	
Name of Addition	al Inventor, if any	; ;	[A petiti	on has been filed	for th	nis unsigned inventor	
Given	Name (first and middle	[if any])		Family Name or Surname				
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Inventor's Signature							Date	
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Mailing Address	72072 TUEBINGEN							
City	St	ate	Zij	р		Cou	intryDE	
Name of Addition	al Inventor, if any	1		☐ A petition has been filed for this unsigned inventor				
Given	Name (first and middle	[if any])			Fa	mily l	Name or Surname	
GORDON MARK				STOTT				
Inventor's Signature						Date		
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Mailing Address 11 UPPER TERRACE								
Mailing Address								
City	San Francisco	State CA		Zip	94117	Со	untry	

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VA 22313-1450.

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Name of Additional Inventor, if any			☐ A petition has been filed for this unsigned inventor			
Given Name (first and midd	le [if any])		Family Name or Surname			
TORSTEN		TF	ROWE			
Inventor's Signature				Date		
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Mailing Address						
City San Francisco	CA State	ZIP	94110	US Country		
Name of Additional Inventor, if any			A petition has been filed	for this unsigned inventor		
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Inventor's Signature	-			Date		
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JOERG HEINRICH		0	DENTHAL			
Inventor's Signature			Date			
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Mailing Address OTTO-ERBE-WE	G 18					
Mailing Address 72070 TUEBINGE	N					
City	State		Zip	Country		

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Page 4 of 5

			_				
Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor			
Given I	Name (first and middle)	(if any])		Family Name or Surname			
JOCHEN KONRAD			sc	CHEEL			
Inventor's Signature							
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Mailing Address	1065 LUPIN WAY						
Mailing Address							
City San Carlos	s	Ca State	ZIP	94070	Cou	US untry	
Name of Addition	al Inventor, if any	1		A petition has been file	d for t	this unsigned inventor	
Given	Name (first and middle	[if any])		F	amily	Name or Surname	
TORSTEN TILMANN			w	/ILL			
Inventor's Signature						Date	
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Mailing Address	FRIEDRICHSTR 29						
Mailing Address	D-33615 BIELEFELD)					
City	St	tate	Zip		Co	untry DE	
Name of Addition	al Inventor, if any	y		☐ A petition has been	filed f	or this unsigned inventor	
Given	Name (first and middle	[if any])		F	amily	Name or Surname	
YISHENG			JI	IN	-		
Inventor's Signature						Date	
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Mailing Address	192 36 TH AVENUE, A	APT. B					
Mailing Address							
City	SAN MATEO	State CA		Zip 94403	C	ountry	

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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page <u>5</u> of <u>5</u>

Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor				
Given	Name (first and midd	lle [if any])		Family Name or Surname				
JOANNE I.			A	ADAMKEWICZ				
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Mailing Address								
City SAN FRANCISCO		CA State	ZIP	94107	Co	US ountry		
Name of Addition	nal Inventor, if a	ny		☐ A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])				Fa	mily	Name or Surname		
Inventor's Signature						Date		
Residence: City		State	Cou	ntry		Citizenship		
Mailing Address								
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City		State	Zip		Co	untry		
Name of Addition	nal Inventor, if a	ny		☐ A petition has been filed for this unsigned inventor				
Given	Name (first and midd	dle [if any])		Fa	mily	Name or Surname		
Inventor's Signature						Date		
Residence: City	esidence: City State Country				Cltizenship			
Mailing Address								
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Plowman, et al

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10/532,406

April 22, 2005

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DECLARATION FOR UTILITY OR

DESIGN

PATENT APPLICATION (37 CFR 1.63)

⊠Declaration

Submitted after Initial

□ Declaration

Submitted

Attorney Docket Number

First Named Inventor

Application Number

Filing Date

	With Initial Filing	Filing (surcharge (37 CFR 1.16 (e))										
	9	required)	Examiner Name	Lamont M. Hu	unter							
	•			•								
	I hereby declare that:		• .	·	*							
	Each inventor's residence	ce, mailing address, and citi	izenship are as stated be	low next to their	name.							
	I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:											
·	MAPK7 AS MODI	FIER OF BRANCHING	G MORPHOGENES	IS AND METI	HODS OF USE							
				•								
	the specification of which	(Title of the	e Invention)									
	☐ is attached hereto											
	OR			*								
	was filed on (MM/DD	/YYYY) 10/22/2003	as United States Ap	plication Number o	r PCT International .							
Αp	oplication Number	PCT/US03/33551 and	was amended on (MM/DD/Y	YYY)	(if applicable).							
	nereby state that I have rev mended specifically referre	viewed and understand the co d to above.	ontents of the above identif	ied specification, i	ncluding the claims, as							
CC	ontinuation-in-part applicati	sclose information which is m ions, material information whi onal filing date of the continu	ch became available betwe									
St.	eeder's rights certificate(s), ates of America, listed belov	or 365(a) of any PCT internation	onal application which designw, by checking the box, any	nated at least one foreign application	for patent, inventor's or plant							
P	rior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?							
	- Number(3)	Country	(1111110071111)	Not Gluimed	YES NO							
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Г	Additional foreign applicat	ion numbers are listed on a suc	polemental priority data shee	t PTO/SB/02B attac	ched hereto:							

[Page 1 of 2] [Page 1 of 2]
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	er		23500		OR	Correspondence address below	
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Laleh Shayesteh							
Address							
Exelixis, Inc.							
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P.O. Box 511							
City	State				z	ZIP · ·	
South San Francisco	CA				94	94083-0511	
Country		1	Γelepho	one		Fax	
US	·	6	50-837-	-8223		650-837-8234	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:			A petiti	on has l	been filed	d for this unsigned inventor	
Given Name (first and middle [if any])			1	•	or Surna	iame .	
GREGORY D.			PLO\	WMAN			
Inventor's Signature					Date		
Residence: City	State			Counti	гу	Citizenship	
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NAME OF SECOND INVENTOR:			A petiti	ion has	been filed	d for this unsigned inventor	
Given Name (first and middle [if any]) FELIX D.			Fami KAR	-	e or Surn	name	
Inventor's Signature			1		Date		
Residence: City	State			Count	ry	Citizenship	
WALNUT CREEK	CA			us		us '	
Mailing Address 732 LAUREL DRIVE	.1						
City	State	,		Zip		Country	
WALNUT CREEK	CA			94596	3	us	
Additional inventors or a legal representative are being n	amed on t	he <u>5</u> sup	plementa	al sheet(s) PTO/SB/0	02A or 02LR attached hereto.	

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ADDITIONAL INVENTOR(S) Supplemental Sheet

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Name of Additional Inventor, if a	ny	A petition has been filed for this unsigned inventor				
Given Name (first and midd	le [if any])	Family Name or Surname				
CANDACE		SWIMMER				
Inventor's Signature			Date			
SAN Residence: City FRANCISCO	CA State	US Country	US Citizenship			
Mailing Address 1064 CAROLINA S	STREET	·.				
Mailing Address						
City SAN FRANCISCO	CA State	94107 ZIP	US Country			
Name of Additional Inventor, if a	ny	☐ A petition has been filed	for this unsigned inventor.			
Given Name (first and midd	lle [if any])	Family Name or Surname				
HINRICH ALEXANDER		HABECK.				
Inventor's Signature	*	*	Date			
Residence: City	State	Country	Citizenship DE			
Mailing Address GERTRUD-BAEUM	MER-STR. 74	ν.				
Mailing Address 72074 TUEBINGE	N					
City	State	Zip	Country			
Name of Additional Inventor, if a	ny	☐ A petition has been filed for this unsigned inventor				
Given Name (first and midd	lle [if any])	· Far	nily Name or Surname			
THOMAS I.		KOBLIZEK				
Inventor's Signature	SUC		Date 10/05/2005			
Residence: City	State	Country DE	Citizenship			
Mailing Address GECHTSTR. 31						
Mailing Address 72074 TUEBINGE	N .					
City	State	Zip	,Country DE			

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Page <u>2</u> of <u>5</u>

Name of Additional Inventor, if a	iny ·	☐ A petition has been	A petition has been filed for this unsigned inventor				
Given Name (first and midd	dle [if any])	.1	Family Name or Surname				
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Inventor's Signature		*	Date				
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City	State	ZIP	Country				
Name of Additional Inventor, if a	ny	☐ A petition has been file	ed for this unsigned inventor				
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Mailing Address 72072 TUEBINGE	N						
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Name of Additional Inventor, if a	ny	☐ A petition has been	☐ A petition has been filed for this unsigned inventor				
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GORDON MARK		STOTT					
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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 3 of 5

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Name of Additional Inventor, if any			☐ A petition has been filed for this unsigned inventor				
Given Name (first and midd	lle (if any))		Family Name or Surname				
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Name of Additional Inventor, if a	ny		A petition has been filed	for t	his unsigned inventor		
Given Name (first and midd	le [if any])		Family Name or Surname				
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Name of Additional Inventor, if a	ıy		☐ A petition has been filed for this unsigned inventor				
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JOERG HEINRICH		0	DENTHAL				
Inventor's Signature					Date		
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Mailing Address 72070 TUEBINGEN	1						
City	State		Zip	Co	untry		

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Page <u>4</u> of <u>5</u>

Name of Additional Inventor	, if any		ΠA	☐ A petition has been filed for this unsigned inventor			
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JOCHEN KONRAD			SCH	SCHEEL			
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Name of Additional Inventor	, if any	*	ΠA	petition has been file	d for ti	his unsigned inventor	
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	ENUE, APT. B						
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City SAN MATEO	State	CA	z	ip 94403	Co	ountry	

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Page <u>5</u> of <u>5</u>

Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor					
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Inventor's Signature						Date			
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Mailing Address									
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Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor					
Given N	Given Name (first and middle [if any])				Family Name or Surname				
Inventor's Signature				Date					
Residence: City		State ·		Country		Citizenship			
Mailing Address									
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City	s	tate	Zip	Zip Country		untry			
Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature				·		Date			
Residence: City		State	Cou	Country		Citizenship			
Mailing Address									
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Plowman, et al

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10/532,406

April 22, 2005

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DECLARATION FOR UTILITY OR

DESIGN

PATENT APPLICATION (37 CFR 1.63)

□ Declaration

Declaration

Attorney Docket Number

First Named Inventor

Application Number

Filing Date

Judiniked On					
With Initial	Filing (surcharge	Art Unit	-		
Filing	(37 CFR 1.16 (e)) required)	Examiner Name	Lamont M. Hu	nter	
		<u></u>			
I hereby declare that:			-	×	
Each inventor's residence	ce, mailing address, and cit	zenship are as stated bel	ow next to their r	name.	. •
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the specification of which	(Title of th	e Invention)		ì	, ,
is attached hereto	•				
OR	. ,				
was filed on (MM/DD	/YYYY) 10/22/2003	as United States Ap	plication Number of	PCT Internation	ıai
Application Number	PCT/US03/33551 and	was amended on (MM/DD/Y)	YYY)	•	(if applicable).
I hereby state that I have revamended specifically referre	viewed and understand the co	ontents of the above identif	ied specification, i	ncluding the cla	ims, as
I acknowledge the duty to di	sclose information which is m	naterial to patentability as d	efined in 37 CFR	1.56, including t	or
continuation-in-part applicati	ions, material information whi	ch became available betwe	en the filing date	of the prior app	ication and
	benefits under 35 U.S.C. 119(a		oreign application(s) for patent, inve	ntor's or plant
breeder's rights certificate(s), States of America, listed below	or 365(a) of any PCT internati w and have also identified belo or any PCT international appl	ional application which design by checking the box, any	nated at least one foreign application	country other the for patent, inve	an the United ntor's or plant
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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop	•
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Additional foreign applicat	tion numbers are listed on a sur	polemental priority data shee	t PTO/SB/02B attac	ched hereto:	9

form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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Direct all correspondence to: Customer N	lumber		23500		01	٦ [Correspondence address below
Name -							
Laleh Shayesteh							
Address	- 3						
Exelixis, Inc.						•	
170 Harbor Way	_						
P.O. Box 511							
City	State		_	_		ZIP	
South San Francisco	CA					94083	3-0511
Country			Teleph	one		F	ax
US	0.		650-837	-8223		. 6	50-837-8234
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:			A petiti	ion has	been fi	led for	this unsigned inventor
Given Name (first and middle [if any])	-	·.	1	ily Name	e or Su	rname	
GREGORY D.			PLO'	WMAN		•	•
Inventor's Signature					Date	0	
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Mailing Address 35 WINDING WAY							
City	State	9		Zip			Country
SAN CARLOS	CA			94070			US
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Inventor's Signature			*	-	Date		
Residence: City	State	9		Count	ry		Citizenship
WALNUT CREEK	. CA			US			US
Mailing Address 732 LAUREL DRIVE						<u>1</u>	
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WALNUT CREEK	CA			94596			US
Additional inventors or a legal representative are bei	ing named or	1 the <u>5</u> sup	plementa	al sheet(s)	PTO/S	B/02A o	r 02LR attached hereto.

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ADDITIONAL INVENTOR(S) Supplemental Sheet

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Name of Additional Inventor, if any				A petition has been filed for this unsigned inventor				
Given	Name (first and middle	e [if any])		Family Name or Surname				
CANDACE			5	SWIMMER				
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HINRICH ALEXANDER] _}	IABECK				
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page <u>2</u> of <u>5</u>

Name of Additional Inventor, if a	ny	☐ A petition has been	A petition has been filed for this unsigned inventor			
Given Name (first and midd	dle [if any])	F	Family Name or Surname			
STEFAN (* C	·	SCHULTE-MERKER				
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Name of Additional Inventor, if a	ny	☐ A petition has been file	ed for this unsigned inventor			
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Name of Additional Inventor, if a	ny	☐ A petition has been	filed for this unsigned inventor			
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Mailing Address 11 UPPER TERRA	CE					
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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 3 of 5

Name of Additional Invento	or, if any		☐ A petition has been filed for this unsigned inventor			
Given Name (first a	and middle (if any))		Family Name or Surname			
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Name of Additional Invento	or, if any		☐ A petition has been filed for this unsigned inventor			
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Mailing Address 72070 TUE	BINGEN					
City	State		Zip	Country		

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ADDITIONAL INVENTOR(S)
Supplemental Sheet

Page 4 of 5

Name of Addition	al Inventor, if any			A petition has been filed for this unsigned inventor				
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Name of Additional Inventor, if any				A petit	ion has been filed	for t	his unsigned inventor	
Given Name (first and middle [if any])				Family Name or Surname				
TORSTEN TILMANN				WILL				
Inventor's Signature							Date	
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City	s	tate	Zij	р		Coi	untry DE	
Name of Addition	nal Inventor, if an	у			etition has been f	iled f	or this unsigned inventor	
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Page <u>5</u> of <u>5</u>

Name of Additional li	nventor, if an	у		☐ A petition has been filed for this unsigned inventor				
Given Nam	ne (first and middle	e [if any])		Family Name or Surname				
JOANNE I.				DAMKEWICZ				
Inventor's Signature						Date		
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Mailing Address 12	49 RHODE ISLAN	ID STREET .						
Mailing Address								
City SAN FRANCISCO		CA State	ZIP	94107	Co	US		
Name of Additional Ir	nventor, if any	у		A petition has been filed	d for t	his unsigned inventor		
Given Name (first and middle [if any])				Family Name or Surname				
Inventor's Signature						Date		
Residence: City		State	Cou	untry .		Citizenship		
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City	St	tate	Zip		Col	untry		
Name of Additional Ir	nventor, if any	у		☐ A petition has been filed for this unsigned inventor				
Given Nam	e (first and middle	[if any])		Fa	mily l	Name or Surname		
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Inventor's Signature						Date		
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DECLARATION FOR UTILITY OR

DESIGN

PATENT APPLICATION (37 CFR 1.63)

OR

□ Declaration

Submitted

With Initial

□ Declaration

Submitted after Initial

Filing (surcharge

Attorney Docket Number

First Named Inventor

Application Number

Filing Date

Art Unit

	Filing	required)	Lamont M. Hu	nter	ノ					
_										
ı	I hereby declare that:									
E	Each inventor's residence, mailing address, and citizenship are as stated below next to their name.									
	I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent									
į	is sought on the invention entitled:									
	MAPK7 AS MODII	FIER OF BRANCHING	MORPHOGENES	IS AND METH	HODS OF USE					
İ										
						╛╽				
_	the specification of which	(Title of the	e Invention)							
	is attached hereto									
	OR									
	□ was filed on (MM/DD/YYYY)									
٠.	olication Number	1 01/0303/33331	was amended on (MM/DD/Y	· <u></u>	(if applic	· ·				
l he am	ereby state that I have revended specifically referre	riewed and understand the co d to above.	ontents of the above identif	ied specification, i	ncluding the claims, as					
COL	ntinuation-in-part applicati	sclose information which is mons, material information whith onal filing date of the continu	ch became available betw	lefined in 37 CFR een the filing date	1.56, including for of the prior application	and				
Lhe	ereby claim foreign priority	penefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any f	oreign application(s) for patent, inventor's o	r plant				
Cto	tee of America listed help	or 365(a) of any PCT internati w and have also identified belo	nw by checking the box, any	v foreign application	i for patent, inventors of	r piant				
	eder's rights certificate(s), imed	or any PCT international appl	ication having a filing date	before that of the a	ipplication on which pro	ority is				
Pr	ior Foreign Application	Q	Foreign Filing Date	Priority Not Claimed	Certified Copy Attac	hed?				
	Number(s)	Country	(MM/DD/YYYY)	Not Claimed		NO				
	<u> </u>									
	Additional foreign applica	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								

form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

[Page 1 of 2] This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFr 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application.

DECLARATION — Utility or Design Patent Application

					1	
Direct all correspondence to: Customer Number	r [23500		OR	Correspondence address below
Name						
Laleh Shayesteh						
Address						
Exelixis, Inc.						
170 Harbor Way						
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City	State				Z	ZIP
South San Francisco	CA		.,,		94	4083-0511
Country			Telepho	one		Fax
US		\perp	650-837-	-8223		650-837-8234
I hereby declare that all statements made herein of my own believed to be true; and further that these statements were no punishable by fine or imprisonment, or both, under 18 U.S.C application or any patent issued thereon.	made with	h the kr	nowledae	that will	iui taise sta	atements and the like so made are
NAME OF SOLE OR FIRST INVENTOR:			A petiti	on has l	been filed	d for this unsigned inventor
Given Name (first and middle [if any]) GREGORY D. Family Name or Surname PLOWMAN						
Inventor's Signature					Date	
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Mailing Address 35 WINDING WAY	•					
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NAME OF SECOND INVENTOR:			A petit	ion has	been filed	d for this unsigned inventor
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Inventor's Signature					Date	
Residence: City WALNUT CREEK	State			Count	ry	Citizenship US
Mailing Address 732 LAUREL DRIVE	1			<u> </u>		
City WALNUT CREEK	State CA			Zip 94596	}	Country US
Additional inventors or a legal representative are being n	amed on t	he 5 su	pplement	al sheet(s) PTO/SB/0	02A or 02LR attached hereto.

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

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Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor				
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City SAN FRANCISCO		CA State	ZIP	94107	Cot	US		
Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])			Family Name or Surname					
HINRICH ALEXANDER			Н.	ABECK				
Inventor's Signature						Date		
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Name of Addition	al Inventor, if an	у	-	☐ A petition has been filed for this unsigned inventor				
. Given	Name (first and middl	e [if any])		Fa	mily	Name or Surname		
THOMAS I.			к	OBLIZEK				
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Residence: City		State	Cot	untry		Citizenship DE		
Mailing Address	GECHTSTR. 31							
Mailing Address	72074 TUEBINGEN	1				· · · · · · · · · · · · · · · · · · ·		
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Page 2 of 5

Name of Additional Inventor, if	anv		☐ A petition has been filed for this unsigned inventor			
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	or's 10.30 /au Alex 50			Date The odds Wes		
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Page 3 of 5

Name of Additional Inventor, if ar	ıy	☐ A petition has been filed for this unsigned inventor					
Given Name (first and middle	<u> </u>		Family Name or Surname				
	e (ii ariy))	TROWE	anny Name of Sumame				
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JOERG HEINRICH		ODENTHAL					
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Mailing Address 72070 TUEBINGER	1						
City	State	Zip	Country				

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Fage 4 of 5

Name of Additional	Inventor, if any		☐ A petition has been f	☐ A petition has been filed for this unsigned inventor			
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Mailing Address .							
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Mailing Address							
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Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor				
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JOANNE I.			ΑI	ADAMKEWICZ				
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Mailing Address								
City SAN FRANCISCO		CA State	ZIP	94107	_Co	US untry		
Name of Addition	al Inventor, if ar	ıy		☐ A petition has been filed for this unsigned inventor				
Given	Name (first and midd	le [if any])		Family Name or Surname				
				-				
Inventor's Signature						Date		
Residence: City		State	Cou	intry		Citizeriship		
Mailing Address								
Mailing Address								
City		State	Zip		Co	untry		
Name of Addition	al Inventor, if a	ny		A petition has been filed for this unsigned inventor				
Given	Name (first and midd	ie [if any])		Fa	amily	Name or Surname		
	•							
Inventor's Signature						Date		
Residence: City		State	Cou	intry		Citizenship		
Mailing Address			•					
Mailing Address								
City		State	Zip Co			ountry		

EX03-079C-US

Plowman, et al

COMPLETE IF KNOWN

10/532,406

April 22, 2005

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DECLARATION FOR UTILITY OR

DESIGN

PATENT APPLICATION (37 CFR 1.63)

OR

□ Declaration

Submitted after Initial

Declaration

Submitted

Attorney Docket Number

First Named Inventor

Application Number

Filing Date

With Initial	Filing (surcharge (37 CFR 1.16 (e))	Art Unit									
Filing	required)	Examiner Name	Lamont M. Hu	nter	ノ						
I hereby declare that:											
Each inventor's residenc	e, mailing address, and citi	zenship are as stated bel	ow next to their n	name.							
	I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent										
is sought on the invention er	ntitled:	This inventor(s) of the subject			7						
MAPK7 AS MODIF	FIER OF BRANCHING	MORPHOGENES	IS AND METH	HODS OF USE							
the specification of which	(Title of the	e Invention)			_						
is attached hereto	(7.1.0 07.1				1						
OR											
was filed on (MM/DD/	YYYY) 10/22/2003	as United States Ap	plication Number or	PCT International	ĺ						
Application Number	PCT/US03/33551 and	 was amended on (MM/DD/Y)	YYY)	(if applic	able).						
• •	riewed and understand the co	ontents of the above identif	ied specification, in	ncluding the claims, as							
continuation-in-part applicati	sclose information which is mons, material information which onal filing date of the continu	ch became available betwe	efined in 37 CFR een the filing date	1.56, including for of the prior application	and						
I hereby claim foreign priority h	nenefits under 35 U.S.C. 119(a))-(d) or (f), or 365(b) of any fo	oreign application(s) for patent, inventor's or	plant						
breeder's rights certificate(s).	or 365(a) of any PCT internati w and have also identified belo	onal application which desig	nated at least one	country other than the t	Jnited						
breeder's rights certificate(s), claimed.	or any PCT international appl	ication having a filing date t	pefore that of the a	pplication on which price	ority is						
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attac							
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[Page 1 of 2]

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Country			relepho	one		Fax	
US			50-837			650-837-8234	
I hereby declare that all statements made herein of my own believed to be true; and further that these statements were punishable by fine or imprisonment, or both, under 18 U.S.C application or any patent issued thereon.	made wit	h the kno	owledge	that will	iul false st	atements and the like so ma	ide are
NAME OF SOLE OR FIRST INVENTOR:			A petiti	on has	been file	for this unsigned inven	tor
Given Name (first and middle [if any]) GREGORY D.			ı	ily Namo WMAN	or Sum	ame	
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Mailing Address 35 WINDING WAY	•						
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WALNUT CREEK	CA			94596		US	
Additional inventors or a legal representative are being n	amed on 1	the <u>5</u> sup	plementa	al sheet(s	PTO/SB/0	2A or 02LR attached hereto.	

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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page <u>1</u> of <u>5</u>

Name of Addition	al Inventor, if an	у		A petition has been filed for this unsigned inventor				
Given	Name (first and middle	e [if any])		Family Name or Surname				
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Inventor's Signature						Date		
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HINRICH ALEXANDER			Н	ABECK				
Inventor's Signature						Date		
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THOMAS I.			к	OBLIZEK				
Inventor's Signature						Date		
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ADDITIONAL INVENTOR(S)
Supplemental Sheet

Page 2 of 5

Name of Additional Inventor, if a	iny		☐ A petition has been filed for this unsigned inventor			
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ULRIKE			LANGHEINRICH			
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GORDON MARK			sтотт			
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Page <u>3</u> of <u>5</u>

Name of Additional Inventor, if a	ny	☐ A petition has bee	☐ A petition has been filed for this unsigned inventor				
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Name of Additional Inventor, if a	ny	☐ A petition has been fi	led for this unsigned inventor				
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ANDREAS MICHAEL		VOGEL					
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Name of Additional Inventor, if a	ny	☐ A petition has bee	n filed for this unsigned inventor				
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JOERG HEINRICH		ODENTHAL					
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Mailing Address 72070 TUEBINGER	N						
City	State	Zip	Country DE				

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Page <u>4</u> of <u>5</u>

Name of Additional Inventor, if an		☐ A petition has been filed for this unsigned inventor				
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City	State	Zip		Coi	untry DE	
Name of Additional Inventor, if an	у		☐ A petition has been filed for this unsigned inventor			
Given Name (first and middl	e [if any])		Family Name or Surname			
YISHENG		J	IN			
Inventor's Signature Date					Date	
Residence: City SAN MATEO	State CA	Co	untry US		Citizenship CN	
Mailing Address 192 36 TH AVENUE,	APT. B					
Mailing Address						
City SAN MATEO	State CA		Zip 94403	Co	ountry US	

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page <u>5</u> of <u>5</u>

Name of Additional Inventor, if any			☐ A petition has been filed for this unsigned inventor				
Given Name (first and middle	e [if any])		Family Name or Surname				
JOANNE I.		Α	ADAMKEWICZ				
Inventor's Signature Jame I Ham	seure/				Date 9/23/05		
Residence: City FRANCISCO	CA State	Cou	US US Country Citizenship				
Mailing Address A 1249 PHODE ISLAN	HOSTREET 757A	Mc	Clay Road				
Mailing Address							
city sangly francisco ₄₋₂₃₋₀₅ NOVATO	CA State	FI A	9-23-05 - 04107 94947	Co	US		
Name of Additional Inventor, if an	у		A petition has been filed	i for	this unsigned inventor		
Given Name (first and middle	e (if any))	Family Name or Surname					
Inventor's Signature					Date		
Residence: City	State	Cou	ıntry		Citizenship		
Mailing Address							
Mailing Address							
City	tate	Zip		Co	untry		
Name of Additional Inventor, if an	у	☐ A petition has been filed for this unsigned inventor					
Given Name (first and middle	e [if any])		Fa	mily	Name or Surname		
Inventor's Signature					Date		
Residence: City	State	Cou	intry		Citizenship		
Mailing Address							
Mailing Address		_					
City	State		Zip	C	ountry		

PTO/SB/01 (09-04)

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION		Attorney Docket Numb	r EX03-079C-US	EX03-079C-US		
		First Named Inventor	Plowman, et al			
			COMPLETE IF KNOWN			
(37 CFR 1.63)		Application Number	Application Number 10/532,406			
☐Declaration Submitted			Filing Date	April 22, 2005		
With Initial Filing		Filing (surcharge (37 CFR 1.16 (e))	Art Unit			
required)			Examiner Name	Lamont M. Hunter		
	-					

I hereby declare that:										
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.										
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
MAPK7 AS MODIFIER OF BRANCHING MORPHOGENESIS AND METHODS OF USE										
the specification of which	(Title of th	ne Invention)								
is attached hereto	•									
OR ·	aaaa .			. *	_					
■ Was filed on (MM/DD)	(YYYY) 10/22/2003	as United States Ap	plication Number o	r PC1 Internation	al .					
Application Number	PCT/US03/33551 and	was amended on (MM/DD/Y	YYY)		if applicable).					
I hereby state that I have rev amended specifically referre		ontents of the above identif	ied specification, i	ncluding the cla	ims, as					
I acknowledge the duty to di continuation-in-part applicati the national or PCT internati	ons, material information whi	ich became available betwe								
I hereby claim foreign priority to breeder's rights certificate(s), States of America, listed below breeder's rights certificate(s), claimed.	or 365(a) of any PCT internati w and have also identified belo	ional application which desig ow, by checking the box, any	nated at least one foreign application	country other that for patent, inves	an the United					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop	y Attached? NO					
		7								
·					. 🗖					
Additional foreign applicat	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	oer		23500		OR	Correspondence address below		
Name								
Laleh Shayesteh								
Address		- \$						
Exelixis, Inc.						•		
170 Harbor Way	•				:	, #e		
P.O. Box 511								
City	State				ZI	P		
South San Francisco	CA	· · · · · ·		`	94	083-0511		
Country			Teleph	one		Fax		
US			650-837	-8223		650-837-8234		
I hereby declare that all statements made herein of my own believed to be true; and further that these statements were punishable by fine or imprisonment, or both, under 18 U.S. application or any patent issued thereon.	made v	vith the i	knowledge	e that will	ful false sta	tements and the like so made are		
NAME OF SOLE OR FIRST INVENTOR:			A petit	ion has	been filed	for this unsigned inventor		
Given Name (first and middle [if any])				Family Name or Surname				
GREGORY D.			PLO	WMAN		•		
Inventor's Signature					Date			
Residence: City	Stat	9		Count	ry	Citizenship		
SAN CARLOS	CA			us		US		
Mailing Address 35 WINDING WAY	, .		,		, , , , ,			
City	Stat	е		Zip		Country		
SAN CARLOS	CA	•		94070		US		
NAME OF SECOND INVENTOR:	-		A petit	ion has	been filed	for this unsigned inventor		
Given Name (first and middle (if any]) FELIX D.			Fam KAR	-	e or Surna	me		
Inventor's Signature			-		Date			
Residence: City	Stat	Э		Count	ry	Citizenship		
WALNUT CREEK	CA			US		US		
Mailing Address 732 LAUREL DRIVE								
City	Stat	e		Zip		Country		
WALNUT CREEK	CA			94596		US		
Additional inventors or a legal representative are being r	named o	n the <u>5</u> s	upplement	al sheet(s) PTO/SB/02	A or 02LR attached hereto.		

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 1 of 5

Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor				
Given I	Name (first and midd	le (if any))		Family Name or Surname				
CANDACE			S	SWIMMER				
Inventor's Signature						Date		
Residence: City	SAN FRANCISCO	CA State	Co	US		US Citizenship		
Mailing Address	1064 CAROLINA S	TREET						
Mailing Address	*							
City SAN FRANCISCO		CA State	ZIP	94107	Coun	US try		
Name of Additiona	al Inventor, if ar	ny .		A petition has been filed for this unsigned inventor				
Given N	Name (first and middl	e [if any])		Family Name or Surname				
HINRICH ALEXANDER			Н	IABECK				
Inventor's Signature				Date				
Residence: City		State	Cou	untry DE		Citizenship DE		
Mailing Address	GERTRUD-BAEUM	IER-STR. 74			•			
Mailing Address	72074 TUEBINGEN	1						
City		State	Zip		Count	try DE		
Name of Additiona	I Inventor, if an	ıy.		☐ A petition has been filed for this unsigned inventor				
Given N	Name (first and middle	e [if any])		Fai	nily Na	me or Surname		
THOMAS I.			к	OBLIZEK				
Inventor's Signature						Date		
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Mailing Address	GECHTSTR. 31			,				
Mailing Address	72074 TUEBINGEN	·						
City		State		Zip	Coun	Country DE		

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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 2 of 5

Name of Additional Inventor, if a	iny	A petition has been	☐ A petition has been filed for this unsigned inventor			
Given Name (first and mid	dle (if any])	F	Family Name or Surname			
STEFAN		SCHULTE-MERKER				
Inventor's Signature			Date			
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Mailing Address 3584 CT UTRECH	· ·					
City	State	ZIP	NL Country			
Name of Additional Inventor, if a	ny	☐ A petition has been file	d for this unsigned inventor			
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Inventor's Signature	· · ·	*	Date			
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Mailing Address 72072 TUEBINGE	N					
City	State	Zip	Country DE			
Name of Additional Inventor, if a	ny	☐ A petition has been	filed for this unsigned inventor			
Given Name (first and midd	dle [if any])	F.	amily Name or Surname			
GORDON MARK		STOTT				
Inventor's Signature			Date			
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Mailing Address 11 UPPER TERRA	ACE					
Mailing Address						
City San Francisco	State CA	Zip 94117	Country US			

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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 3 of 5

Name of Additional Inventor, if a	ıy	☐ A petition has been filed for this unsigned inventor			
Given Name (first and midd	le (if any))	Family Name or Surname			
TORSTEN		TROWE			
Inventor's Signature				Date	
Residence: City San Francisco	CA State	Country	Ci	DE tizenship	
Mailing Address 188 WINFIELD STI	REET, APTARTMENT 5				
Mailing Address					
City San Francisco	CA State	94110 ZIP	Country	us /·	
Name of Additional Inventor, if a	A petition has been	filed for this u	nsigned inventor		
Given Name (first and midd	le [if any])	Family Name or Surname			
ANDREAS MICHAEL		VOGEL			
Inventor's Signature	M	, (30 Sex 2005	
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Mailing Address RAPPOLTSHOF 3				•	
Mailing Address CH-4057 BASEL					
City	State	Zip	Country	, CH	
Name of Additional Inventor, if a	ny	☐ A petition has be	en filed for th	s unsigned inventor	
Given Name (first and midd	le [if any])		Family Nam	e or Surname	
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Inventor's Signature				Date	
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Mailing Address OTTO-ERBE-WEG	i 18				
Mailing Address 72070 TUEBINGE	N				
City	State	Zip	Count	ry DE	

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ADDITIONAL INVENTOR(S) **Supplemental Sheet**

Page 4 of 5

Name of Addition	nal Inventor, if any	у		☐ A petition has been filed for this unsigned inventor			
Given	Name (first and middle	(if anvi)		Family Name or Surname			
JOCHEN KONRAD			-	SCHEEL			
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Mailing Address	1065 LUPIN WAY						
Mailing Address							
City San Carlos		Ca State	ZIF	94070	Co	US	
Name of Additional Inventor, if any				A petition has been file	ed for	this unsigned inventor	
Giver	Name (first and middle	e [if any])		F	amily	Name or Surname	
TORSTEN TILMANN				WILL			
Inventor's Signature						Date	
Residence: City		State	Co	ountry DE		Citizenship DE	
Mailing Address	FRIEDRICHSTR 29						
Mailing Address	D-33615 BIELEFELD	D; GERMANY	·····		-		
City	s	tate	Zip)	Со	untry	
Name of Addition	nal Inventor, if an	у		☐ A petition has been filed for this unsigned inventor			
Giver	Name (first and middle	e [if any])		F	amily	Name or Surname	
YISHENG				JIN			
Inventor's Signature						Date	
Residence: City	SAN MATEO	State CA	Co	ountry US		Citizenship	
Mailing Address	192 36 TH AVENUE, A	APT. B				******	
Mailing Address							
City	SAN MATEO	State CA		Zip 94403	c	ountry US	

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page <u>5</u> of <u>5</u>

Name of Additional Inventor, if a	ny		☐ A petition has been filed for this unsigned inventor			
Given Name (first and midd	dle [if any])		Family Name or Surname			
JOANNE I.			DAMKEWICZ			
Inventor's Signature					Date	
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Mailing Address 1249 RHODE ISLA	AND STREET		*			
Mailing Address						
City SAN FRANCISCO	CA State	ZIP	94107	Cou	US	
Name of Additional Inventor, if a	ny		A petition has been filed	for th	nis unsigned inventor	
Given Name (first and midd	lle [if any])	Family Name or Surname				
			·			
Inventor's Signature	•	•			Date	
Residence: City	State	Cou	untry		Citizenship	
Mailing Address						
Mailing Address						
City	State	Zip		Cou	ntry	
Name of Additional Inventor, if a	ny	☐ A petition has been filed for this unsigned inventor				
Given Name (first and midd	lle [if any])		Fa	mily N	Name or Surname	
Inventor's Signature					Date	
Residence: City	State	Cou	ıntry		Citizenship	
Mailing Address						
Mailing Address					•.	
City	State		Zip	Col	untry	

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EX03-079C-US

Plowman, et al

COMPLETE IF KNOWN

10/532,406

April 22, 2005

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DECLARATION FOR UTILITY OR

DESIGN

PATENT APPLICATION (37 CFR 1.63)

OR

□ Declaration

Submitted

With Initial

⊠Declaration

Submitted after Initial

Filing (surcharge

Attorney Docket Number

First Named Inventor

Application Number

Filing Date

Art Unit

Filing	(37 CFR 1.16 (e))												
· ming	required) Examiner Name Lamont M. Hunter												
l hereby declare that:													
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.													
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:													
MAPK7 AS MODIFIER OF BRANCHING MORPHOGENESIS AND METHODS OF USE													
the specification of which	(Title of th	e Invention)											
is attached hereto													
OR													
was filed on (MM/DE	10/22/2003	as United States Ap	plication Number o	r PCT International									
Application Number	PCT/US03/33551 and	was amended on (MM/DD/Y	YYY)	(if a	pplicable).								
I hereby state that I have re amended specifically referre	viewed and understand the coed to above.	ontents of the above identif	ied specification, i	ncluding the claims	s, as								
continuation-in-part applicat	isclose information which is m tions, material information whi ional filing date of the continu	ch became available betwe	lefined in 37 CFR een the filing date	1.56, including for of the prior applica	tion and								
breeder's rights certificate(s), States of America, listed belo	benefits under 35 U.S.C. 119(a or 365(a) of any PCT internati w and have also identified belo or any PCT international appl	onal application which design ow, by checking the box, any	nated at least one foreign application	country other than for patent, inventor	the United r's or plant								
Prior Foreign Application	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy A	ttached?								
Number(s)	Country	(MIW/DD/TTTT)	Not Claimed	YES	NO								
	<u> </u>												
Additional foreign applica	tion numbers are listed on a sur	polemental priority data shee	t PTO/SB/02B attac	ched hereto:									
	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: [Page 1 of 2]												

1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	er		23500		OR		Correspondence address below
Name		-					
Peter K. Seperack							
Address							
Exelixis, Inc.							
170 Harbor Way							
P.O. Box 511							
City	State					ZIP	
South San Francisco	CA					94083	-0511
Country			Telepho	one			ax
us			650-837	-8223		6	50-837-8234
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:			A petiti	ion has	been file	ed for	this unsigned inventor
Given Name (first and middle [if any])			Fam	ily Nam	e or Sur	name	,
GREGORY D.			PLO	WMAN			
Inventor's Signature					Date		
Residence: City	State			Count	ry		Citizenship
SAN CARLOS	CA			US			US
Mailing Address 35 WINDING WAY		·					
City	State			Zip			Country
SAN CARLOS	CA			94070	1		US
NAME OF SECOND INVENTOR:			A petiti	ion has	been file	ed for	this unsigned inventor
Given Name (first and middle [if any]) FELIX D.			Fam KAR		e or Sur	name	,
Inventor's Signature			.1		Date		A production of the state of th
Residence: City	State			Count	ry	I	Citizenship
WALNUT CREEK	CA			US			US
Mailing Address 732 LAUREL DRIVE	1 .			<u></u>			
City	State			Zip			Country
WALNUT CREEK	CA			94596	i	j	US
Additional inventors or a legal representative are being n	amed on	the <u>5</u> su	pplementa	al sheet(s) PTO/SB	3/02A o	r 02LR attached hereto.

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page <u>1</u> of <u>5</u>

Name of Addition	al Inventor, if an	у		☐ A petition has been filed for this unsigned inventor				
Given	Name (first and middle	e [if any])		Family Name or Surname				
CANDACE			s	WIMMER				
Inventor's Signature						Date		
Residence: City	SAN FRANCISCO	CA State	Cou	US US Country Citizenship				
Mailing Address	1064 CAROLINA ST	REET						
Mailing Address				······································				
City SAN FRANCISCO		CA State	ZIP	94107	Cou	US		
Name of Addition	al Inventor, if an	у		A petition has been filed	for t	his unsigned inventor		
Given	Name (first and middle	e [if any])		Family Name or Surname				
HINRICH ALEXANDER			Н	HABECK				
Inventor's Signature						Date		
Residence: City		State	Cou	intry DE		Citizenship DE		
Mailing Address	GERTRUD-BAEUM	ER-STR. 74						
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City	s	itate	Zip		Cou	intry DE		
Name of Addition	al Inventor, if an	у		☐ A petition has been filed for this unsigned inventor				
Given	Name (first and middle	e [if any])		Fa	mily I	Name or Surname		
THOMAS I.			к	OBLIZEK				
Inventor's Signature						Date		
Residence: City		State	Cou	intry DE		Citizenship DE		
Mailing Address	GECHTSTR. 31							
Mailing Address	72074 TUEBINGEN							
City		State		Zip	Со	untry DE		

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 2 of 5

Name of Addition	al Inventor, if an	у	(A petition has been filed for this unsigned inventor				
Given	Name (first and middle	e [if any])		Family Name or Surname				
STEFAN				SCHUL"	TE-MERKER			
inventor's Signature							Date	
Residence: City		State	С	ountry	NL		DE Citizenship	
Mailing Address	HUBRECHT LABOR	RATIUM; NETHERLAN	DS INS	STITUTE	FOR DEVELOR	PMEN	TAL BIOLOGY	
Mailing Address	3584 CT UTRECHT							
City		State	ZI	IP.		Co	NL untry	
Name of Addition	al Inventor, if an	у		☐ A peti	tion has been file	ed for	this unsigned inventor	
Given	Name (first and middle	e [if any])		Family Name or Surname				
ULRIKE	<u> </u>				LANGHEINRICH			
Inventor's Signature							Date	
Residence: City		State	С	ountry	DE		Citizenship DE	
Mailing Address	Kirschnerstrasse 3c							
Mailing Address	82327 Tutzig							
City	s	tate	Zi	ip		Со	untry DE	
Name of Addition	al Inventor, if an	у		□ A p	etition has been	ı filed 1	for this unsigned inventor	
Given I	Name (first and middle	e [if any])			F	amily	Name or Surname	
GORDON MARK				STOTT				
Inventor's Signature							Date	
Residence: City	San Francisco	State Ca	С	ountry	US		Citizenship GB	
Mailing Address	11 UPPER TERRAC	E						
Mailing Address								
City	San Francisco	State CA		Zip	94117	Tc	ountry	

PTO/SB/02A (08-03)

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 3 of 5

Name of Additional Inventor, if an	у	A petition has been filed for this unsigned inventor			
Given Name (first and middle	e [if any])	Family Name or Surname			
TORSTEN		TROWE			
Inventor's Signature			Date		
Residence: City San Francisco	CA State	Country	DE Citizenship		
Mailing Address 188 WINFIELD STR	EET, APTARTMENT 5				
Mailing Address					
City San Francisco	CA State	94110 ZIP	US Country		
Name of Additional Inventor, if an	у	☐ A petition has been file	ed for this unsigned inventor		
Given Name (first and middle	e [if any])	Family Name or Surname			
ANDREAS MICHAEL		VOGEL			
Inventor's Signature	·		Date		
Residence: City	State	Country CH	Citizenship DE		
Mailing Address RAPPOLTSHOF 3			_		
Mailing Address CH-4057 BASEL					
City	itate	Zip	Country CH		
Name of Additional Inventor, if an	у	☐ A petition has been filed for this unsigned inventor			
Given Name (first and middle	e [if any])	F	amily Name or Surname		
JOERG HEINRICH		ODENTHAL			
Inventor's Signature Odward	4)		Date 13.2.2006		
Residence: City	State	Country DE	Citizenship DE		
Mailing Address OTTO-ERBE-WEG	18				
Mailing Address 72070 TUEBINGEN					
City	State	Zip	Country DE		

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 4 of 5

Name of Additional Inventor, if any			A petition has been filed for this unsigned inventor				
Given N	ame (first and middle	[if any])		Family Name or Surname			
JOCHEN KONRAD			SCHEEL				
inventor's Signature					Date		
Residence: City	San Carlos	CA State	Country		DE Citizenship		
Mailing Address	1065 LUPIN WAY						
Mailing Address							
City San Carlos		Ca State	94070 ZIP	Cou	untry		
Name of Additional Inventor, if any			☐ A petition has been	filed for t	his unsigned inventor		
Given Name (first and middle [if any])				Family Name or Surname			
TORSTEN TILMANN			WILL				
Inventor's Signature					Date		
Residence: City		State	Country DE		Citizenship DE		
Mailing Address	Bismarckstr. 4						
Mailing Address	D-33615 BIELEFELD	D; GERMANY					
City	S	tate	Zip	Cor	untry DE		
Name of Additional	I Inventor, if an	у	☐ A petition has be	☐ A petition has been filed for this unsigned inventor			
Given N	ame (first and middle	(if any)		Family Name or Surname			
YISHENG			JIN				
inventor's Signature					Date		
Residence: City	Princeton	State NJ	Country US		Citizenship CN		
Mailing Address	24 Colebrook Ct.						
Mailing Address							
City	Princeton	State NJ	Zip 08540	Co	ountry US		

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page <u>5</u> of <u>5</u>

Name of Addition	onal Inventor, if an	у		A petition has been filed for this unsigned inventor			
Give	en Name (first and middle	e [if any])	*	Family Name or Surname			
JOANNE I.			A	DAMKEWICZ			
Inventor's Signature						Date	
Residence: City	SAN FRANCISCO	CA State	Cou	US untry		US Citizenship	
Mailing Address	1249 RHODE ISLAN	ID STREET					
Mailing Address				•			
City SAN FRANCISCO		CA State	ZIP	94107	Cou	US untry	
Name of Additio	nal Inventor, if an	у .		A petition has been filed	for t	his unsigned inventor	
Give	n Name (first and middle	e [if any])		Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State	Cou	ıntry		Citizenship	
Mailing Address	-	•				,	
Mailing Address	·						
City	s	tate	Zip		Cou	untry	
Name of Additio	nal Inventor, if an	у		☐ A petition has been filed for this unsigned inventor			
Give	n Name (first and middle	[if any])		Fa	mily i	Name or Surname	
Inventor's Signature						Date	
Residence: City		State	Cou	intry		Citizenship	
Mailing Address				*****			
Mailing Address		_				<u> </u>	
City		State		Zip	Co	untry	

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

EX03-079C-US

Plowman, et al

COMPLETE IF KNOWN

10/532,406

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DECLARATION FOR UTILITY OR

DESIGN

PATENT APPLICATION (37 CFR 1.63)

Attorney Docket Number

First Named Inventor

Application Number

☐Declaration ☐ Submitted OR	☑Declaration Filing Date April 22, 2005										
With Initial	Filing (surcharge	Art Unit									
Filing	(37 CFR 1.16 (e)) required)	Examiner Name	Lamont M. Hu	nter							
I hereby declare that:											
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.											
t believe the inventor(s) namis sought on the invention er	ned below to be the original and	first inventor(s) of the subject	ct matter which is c	laimed and for which	a patent						
	FIER OF BRANCHING	MORPHOGENES	IS AND METH	HODS OF USE							
the specification of which	(Title of the	e Invention)									
is attached hereto											
OR											
was filed on (MM/DD/	^{YYYY)} 10/22/2003	as United States Ap	plication Number of	PCT International							
	10170000700001	was amended on (MM/DD/Y	' L		plicable).						
I hereby state that I have rev amended specifically referre	iewed and understand the co d to above.	ontents of the above identif	ied specification, i	ncluding the claims	, as						
I acknowledge the duty to dis continuation-in-part application the national or PCT internation	sclose information which is money, material information which	ch became available betwe	efined in 37 CFR een the filing date	1.56, including for of the prior applicat	ion and						
			oreign application/s) for patent inventor	's or plant						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.											
Prior Foreign Application	0	Foreign Filing Date	Priority Not Claimed	Certified Copy A	tached?						
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES	NO						

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

[Page 1 of 2]

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	iber		23500		OR		Correspondence address below	
Name								
Laleh Shayesteh								
Address								
Exelixis, Inc.								
170 Harbor Way								
P.O. Box 511								
City	State			ZIF			IP	
South San Francisco	CA			940			4083-0511	
Country			p			Fa	ax	
us ·			650-837-8223			65	0-837-8234	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor							this unsigned inventor	
iven Name (first and middle [if any]) REGORY D.			Family Name or Surname PLOWMAN					
Inventor's Signature				Date			·	
Residence: City SAN CARLOS	State CA			Count	ry		Citizenship US	
Mailing Address 35 WINDING WAY								
City	State			Zip			Country	
SAN CARLOS	CA			94070			US	
NAME OF SECOND INVENTOR:				A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) FELIX D.	middle [if any])		Family Name or Surnan KARIM			name	r	
Inventor's Signature			<u> </u>		Date	•		
Residence: City	State			Country			Citizenship	
WALNUT CREEK	CA			us			US	
Mailing Address 732 LAUREL DRIVE								
City WALNUT CREEK	State CA		Zip 94596		3		Country US	
Additional inventors or a legal representative are being named on the 5 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.								

PTO/SB/02A (08-03)

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ADDITIONAL INVENTOR(S) Supplemental Sheet

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Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor				
Given	Name (first and middle	[if any])		Family Name or Surname				
CANDACE			SI	SWIMMER				
Inventor's Signature		_				Date		
Residence: City	SAN FRANCISCO	CA State	Cou	US Intry		US Citizenship		
Mailing Address	1064 CAROLINA ST	REET						
Mailing Address								
City SAN FRANCISCO		CA State	ZIP	94107	Сог	US		
Name of Additional Inventor, if any				A petition has been filed	for t	his unsigned inventor		
Given Name (first and middle [if any])				Family Name or Surname				
HINRICH ALEXANDER	1		н	ABECK				
Inventor's Signature						Date		
Residence: City		State	Cou	ıntry DE		Citizenship DE		
Mailing Address	GERTRUD-BAEUM	ER-STR. 74						
Mailing Address	72074 TUEBINGEN							
City	s	tate	Zip		Cou	untry DE		
Name of Addition	nal Inventor, if an	у		☐ A petition has been filed for this unsigned inventor				
Giver	Name (first and middle	e [if any])		Fa	mily l	Name or Surname		
THOMAS I.			K	OBLIZEK.				
Inventor's Signature						Date		
Residence: City		State	Cor	ıntry DE		Citizenship DE		
Mailing Address	GECHTSTR. 31							
Mailing Address	72074 TUEBINGEN							
City		State		Zip	Co	ountry DE		

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page <u>2</u> of <u>5</u>

Name of Additional Inventor, if any			☐ A petition has been filed for this unsigned inventor				
Given Name (first and midd		$\neg T$	Family Name or Surname				
STEFAN	is (ii arry))		SCHULTE-MERKER				
Inventor's Signature					Date		
Residence: City	State	Co	DE ountry		DE Citizenship		
Mailing Address KRONENSTR. 17							
Mailing Address 72070 TUEBINGEN	1						
City	State	ZI	IP .	Cou	DE untry		
Name of Additional Inventor, if a	ıy	נ	☐ A petition has been filed	for t	his unsigned inventor		
Given Name (first and midd	le [if any])		Fa	amily	Name or Surname		
ULRIKE			LANGHEINRICH				
Inventor's Signature				Date			
Residence: City	State	C	ountry		Citizenship		
Mailing Address DERENDINGER S	TRASSE 104						
Mailing Address 72072 TUEBINGER	N						
City	State	Zi	ip	Col	untry DE		
Name of Additional Inventor, if a	ny		☐ A petition has been filed for this unsigned inventor				
Given Name (first and midd	le (if any))		Fa	amily	Name or Surname		
GORDON MARK			STOTT				
Inventor's Signature			Date				
Residence: City San Francisco	State Ca	С	ountry US		Citizenship DE		
	11 HODED TERRACE						
Mailing Address			·				
City San Francisco	State CA		Zip 94117	Co	ountry US		

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 3 of 5

Name of Additional Inventor, if a	ny	A petition has been fi	A petition has been filed for this unsigned inventor			
Given Name (first and midd	lle [if any])	Family Name or Surname				
TORSTEN		TROWE				
Inventor's Signature			Date			
Residence: City San Francisco	CA State	Country	DE Citizenship			
Mailing Address 188 WINFIELD ST	REET, APTARTMENT 5					
Mailing Address	•					
City San Francisco	CA State	94110 ZIP	US Country			
Name of Additional Inventor, if a	ny	☐ A petition has been filed	for this unsigned inventor			
Given Name (first and midd	fle [if any])	Family Name or Surname				
ANDREAS MICHAEL		VOGEL				
Inventor's Signature			Date			
Residence: City	State	Country	Citizenship			
Mailing Address Rappoltshof 3						
Mailing Address CH-4057 Basel; St	witzerland					
City	State	Zip	Country			
Name of Additional Inventor, if a	ny	A petition has been filed for this unsigned inventor				
Given Name (first and midd	tle [if any])	Fa	mily Name or Surname			
JOERG HEINRICH		ODENTHAL				
Inventor's Signature			Date			
Residence: City	State	Country	Citizenship			
Mailing Address OTTO-ERBE-WEG	3 18					
Mailing Address 72070 TUEBINGE	N					
City	State	Zip	Country			

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page <u>4</u> of <u>5</u>

Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor				
Given Name (f	irst and middle	[if any])		Family Name or Surname				
JOCHEN KONRAD			s	CHEEL				
Inventor's Signature							Date	
Residence: City San C	arlos	CA State	Cou	untry	US		DE Citizenship	
Mailing Address 1065 l	UPIN WAY							
Mailing Address								
City San Carlos	s	Ca State	ZIP	94	070	Co	US untry	
Name of Additional Inve	ntor, if any	′		A petiti	on has been filed	d for t	this unsigned inventor	
Given Name (f	rst and middle	[if any])			Fa	amily	Name or Surname	
TORSTEN TILMANN				WILL				
Inventor's Signature	/aran	n Au	~	- Date Jan 24, 200			Date Jan 24, 2005	
Residence: City	′	State	Cou	untry	DE		Citizenship DE	
Mailing Address Bisma	rckstr. 4							
Mailing Address D-336	15 BIELEFELD	; GERMANY						
City	St	ate	Zip			Co	untry DE	
Name of Additional Inve	entor, if any	,		☐ A petition has been filed for this unsigned inventor				
Given Name (f	rst and middle	[if any])			Fa	amily	Name or Surname	
YISHENG			ال	IN	<u> </u>			
Inventor's Signature							Date	
Residence: City Prince	ton	State NJ	Cou	ıntry	US		Citizenship	
Mailing Address 24 Colebrook Ct.								
Mailing Address								
City	ton	State NJ		Zip	08540	Co	ountry US	

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If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page <u>5</u> of <u>5</u>

Name of Addition	al Inventor, if an	у	☐ A petition has been filed for this unsigned inventor					
Given	Name (first and middle	e [if any])		Fa	mily	Name or Surname		
JOANNE I.			A[DAMKEWICZ				
Inventor's Signature						Date		
Residence: City	SAN FRANCISCO	CA State	Cou	US	US Citizenship			
Mailing Address	1249 RHODE ISLAN	ND STREET						
Mailing Address								
City SAN FRANCISCO	:	CA State	ZIP	94107	Co	US untry		
Name of Addition	al Inventor, if an	ıy		A petition has been filed	for 1	this unsigned inventor		
Given	Name (first and middle	e [if any])	Family Name or Surname					
Inventor's Signature						Date		
Residence: City		State	Cou	intry		Citizenship		
Mailing Address								
Mailing Address								
City	s	State	Zip		Со	untry		
Name of Addition	al Inventor, if an	у	☐ A petition has been filed for this unsigned inventor					
Given	Name (first and middle	e [if any])		Fa	mily	Name or Sumame		
inventor's Signature						Date		
Residence: City		State	Cou	intry		Citizenship		
Mailing Address								
Mailing Address								
City		State		Zip	Co	ountry		

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			Attorney Docket Numb	er	EX03-079C-US				
DECLARA.	DECLARATION FOR UTILITY OR				Plowman, et al				
DESIGN PATENT APPLICATION				COMPLETE IF KNOWN					
		FR 1.63)	Application Number	10/5	532,406				
☐Declaration Submitted		Filing Date	Apri	1 22, 2005					
With Initial	5,1	Filing (surcharge	Art Unit						
Filing		(37 CFR 1.16 (e)) required)	Examiner Name	Lam	nont M. Hunter				
				<u>' </u>					
I hereby decla	re tha	t:			•				
		:::a	tizanahin ara as statad ha	olow ne	avt to their name				

Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent									
is sought on the invention entitled: MAPK7 AS MODIFIER OF BRANCHING MORPHOGENESIS AND METHODS OF USE									
the specification of which	(Title of th	e Invention)							
is attached hereto									
OR									
was filed on (MM/DD	^(YYYY) 10/22/2003	as United States App	plication Number or	PCT Internationa	I				
Application Number	PCT/US03/33551 and	was amended on (MM/DD/Y	YYY)	(if	applicable).				
I hereby state that I have rev amended specifically referre		ontents of the above identifi	ed specification, i	ncluding the clair	ns, as				
I acknowledge the duty to discontinuation-in-part applicati the national or PCT internati	sclose information which is mons, material information whi onal filing date of the continu	ch became available betwe	efined in 37 CFR een the filing date	1.56, including fo of the prior applic	r cation and				
States of America, listed below	penefits under 35 U.S.C. 119(a or 365(a) of any PCT internati w and have also identified belo or any PCT international appl	ional application which design low, by checking the box, any	nated at least one foreign application	country other that for patent, inven	tor's or plant				
Prior Foreign Application		Foreign Filing Date	Priority	Certified Copy	Attached?				
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES	NO				
Additional foreign applicat	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								

[Page 1 of 2]

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ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	er		23500 OR				Correspondence address below
Name							
Laleh Shayesteh							
Address				_			
Exelixis, Inc.							
170 Harbor Way							
P.O. Box 511							
City	State	_			2	ZIP	•
South San Francisco	CA		94083-0511				
Country		1	relepho	one		Fa	
US		e	650-837	-8223		650	D-837-8234
I hereby declare that all statements made herein of my own believed to be true; and further that these statements were runishable by fine or imprisonment, or both, under 18 U.S.C application or any patent issued thereon.	made witl	h the kno	owledge	that willf	ful false si	tatemei	nts and the like so made are
NAME OF SOLE OR FIRST INVENTOR:			A petiti	on has	been file	d for t	his unsigned inventor
Given Name (first and middle [if any]) GREGORY D.			l .	ily Name WMAN	e or Surr	name	
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Additional inventors or a legal representative are being na	amed on t	he 5 sup	plementa	al sheet(s) PTO/SB/	'02A or	02LR attached hereto.

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Page <u>1</u> of <u>5</u>

Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor				
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Page 2 of 5

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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 3 of 5

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Page <u>4</u> of <u>5</u>

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Page <u>5</u> of <u>5</u>

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